

## State Convention Facility Development Tax Return

Issued under P.A. 106 of 1985. Filing is mandatory. Failure to file may result in penalty and interest.

**Due:** 20th of each month.

Hotel Name		Return Period (month/year)	Account No. (same as use tax number)
Registered Business Name (or DBA)		<ol style="list-style-type: none"><li>1. Number of guest rooms .....</li><li>2. Amount of monthly room charges .....</li><li>3. Tax rate (see chart) .....</li><li>4. Multiply line 2 by line 3 .....</li><li>5. Applicable penalty and interest .....</li><li>6. <b>Tax Due.</b> Add lines 4 and 5 .....</li></ol>	
Street Address, City, State ZIP			
Authorized Signature	Date	Make check payable to: <b>State of Michigan</b> Mail to: Michigan Department of Treasury P.O. Box 12216 Lansing, MI 48901	
Telephone No. (       )			

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